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Rita H. Jennings	(Depositor's name)
 Coa H. Jennings	(Signifies)
08/30/2006	(Durc)

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					(Signature)		
			i	08/30/2006	(Liare)		
APPLICATION NO.	FILING DATE	FIRST NAMED	NVENTOR	A FTORNEY DOCKET NO.	CONFIRMATION NO		
10/666,226	09/17/2003	Bruce B. Roesner, Ph.D.		16165-005001	8463		
TITLE OF INVENTION: DE	EP SLEEP IN AN REID TAG						
APPLN, TYPE	SMALL ENTITY	ISSUE FRE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
goaprovistagal	YES	\$700	\$300	\$1000	09/30/2006		
EXAN	MINER	ARTUNIT	CLASS-SURCLASS				
AU, SCOTT D.		2012	340-010330	09/01/2006 TBESHAH2 0	0000070 061050 1066622		
CFR 1.363). 1 Change of correspond Address form PTO/SB/12 1 1"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE; Unless a previously submitted to the (A) NAME OF ASSIGNEE.	tion (or "Fee Address" Indicati r more recent) attached. Use of RESIDENCE DATA TO BE a assignee is identified below, e USPTO or is being submittee	on form agents OR, allet firm (having as agent) and the nattorneys or age will be printed. PRINTED ON THE PATENT (proposed agent) and the nattorneys or age will be printed. PRINTED ON THE PATENT (proposed agent) and the nattorneys or agent will appear on the under separate cover. Completion (B) RESIDENCE (C	natively, (2) the name of a a member a registered atto- ames of up to 2 registered nts. If no name is listed, no int or type) we patent, factusion of assis	patent 2, patent 3. 3. genee data is only appropriate who bistitute for Hing an assignment.	en an assignment has been		
ID Solutions, Inc.		Taipel, TAIWAN					
4a. The following fee(s) are [X] Issue Fee [X] Publication Fee (No s] A check Payment X The Dire	be printed on the patent): [individual X corporation or other private group entity [] government 4b. Payment of Fee(s): [] A check in the amount of the fee(s) is enclosed. [] Payment by credit card. Form PTO-2038 is attached. [X] The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1050 (enclose an extra copy of this form).				
J. J.a. Applicant claims SM	(from status indicated above) fALL ENTITY status, See 37 (SMALL ENTITY status. See 37			
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(Authorized Signature)	S 3.	12 1 0	Date)Au	gyst 3(), 2006			

This collection of information is required by 37 CFR 1-311. The information is required to obtain or orbit in benefit by the public which is to file (and by the OSPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1-14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this bandon, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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47,671

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SUBSTITUTE PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

Typed or Printed Name William E. Hunter

OMB 0651-0033

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